

Equine Adoption/Foster Application

A. General Information (all fields must be completed. If non-applicable enter n/a)

	All applicants must b	e at least 18 years of age.	
Name:			
Address:			
City, State, Zip:		Count	у
Home Phone:		Alternate Phone):
Email Address:		Date of Birth	n:
Employer:			
Employer Address:		Ye	ars Employed:
Are you over the age of	f 18? Yes	Νο	
How did you hear abou	it SBR?		

B. Equine Information (all fields must be completed. If non-applicable enter n/a)

Have you ever been charged with or con	nvicted of	f animal al	ouse? No	Yes
lf yes, please explain			-	
Do you currently own any horses/equin	es? No	Yes	If Yes H	ow Many
When was the date your equine(s) were	last vacc	inated?		
What vaccinations did your equine(s) re	eceive?			
When were your equine(s) last wormed	?			
Do your equines have current Coggins?	? No	Yes	Date of cogg	jins
C. Facility Information (all fields must be applicable enter n/a)	e complete	d. If non-		
applicable enter n/a) Will the equine be located at a different	address	han abov	No	Yes
* If yes please complete the follow			_	
Facility Name:				
Facility Address:				
City, State, Zip:				
Phone Number:	Con	tact Perso	on:	

Contact Person:

Fence	Information	
IEIILE	mormation	

List type of fencing tha pasture:	t surrou	nds the				
How High is the fence?	•					
Is the fence in good repair?	Yes _	No	If No, explain:			
Is there Barbed Wire?	Yes	No				
If there is Barbed Wire, covered in Barbed Wire		ch is				
Are there T-Posts?	Yes _	No	If No,			
Are T-Posts capped?	Yes _	No				
Pasture Information						
Is there pasture or turnout?		How large?	No	Explain		
Is this pasture safe? Yes	No	lf <u>No</u> Expla	in			
Is there any type of dea etc)	oris in or	around pa	sture (metal, tr	ash, No	Ye:	6
If yes, list type of debris:						
Shelter Information Approximate size		lf manr safe	nade is it in go	ood repair and	Yes	No
lf no, explain		Sale				
Is there a barn No`	res	Approx si _stall:	ze of	How mar stalls?	ny barn	
What type material is b etc)	arn made	e from (woo	od, metal, othe	r 		
How often are equine(s barn?) kept in					

Are there any Cattle Guards on the Property?

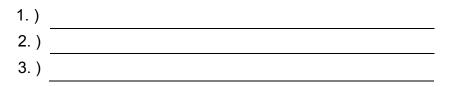
Yes	<u> </u>	Νο	
Yes		No	

Are they separated from the pasture area by a gate?

D. TYPE(S) OF EQUINE PREFERED

(Adoption Only)

Which equine(s) are you interested in? List your first 3 choices. (Additional space available on the back)



What plans do you have or types of events will you use this equine for?

How many hours each week do you plan on spending with the equine?	
For ridable equines, how many days per week will you ride. How long	
of a time each trip do you plan on riding?	

E. EXPERIENCE (all fields must be completed. If non-applicable enter n/a

Please tell us about horses you currently own or have owned in the past (such as what type(s) of equine, how long you owned them, why you no longer own them, what you do/did with them, etc.)

If more space is needed, please state to see back of page and list further information there

Please describe what experience you have handling, caring for, riding, and training equines.

F. EQUINE CARE (all fields must be completed. If non-applicable enter n/a)

How often will you feed the equine?			
What type of feed will be available for the equine?			
How often will a farrier trim or shoe the equine?			
How often will the equine be wormed?			
If there are special dietary needs for the equine(s), can they be met?	res _	No	
Is the feed clean and safe for equines? YesNoExplain			
How is feed stored?			
Are equines fed separately If grained do they have their or as a group? own feed bucket? What type of water	res _	No	
source Is water source clean	Yes _	No	
Can it accommodate all equines? Yes No How often is water cleaned			
How many equines are kept on the			
If there are stallions on the property are they kept separate from the horses?	other	Yes	_No
If no, please explain:			

G. <u>REFERENCE INFORMATION:</u> (all fields must be completed)

The required references are: Veterinarian, Equine Professional (this may be a trainer, farrier, etc.) and personal (no relation). These must be three (3) separate people. Please let your references know that we will be calling them to ask them a few questions.

Please complete the following information for your references:

*Veterinarian Name:	
Address:	
City, State, Zip:	
	Adoption Application

Phone Number:

* This is your vet or who will become your veterinarian

Equine Professional Name:	
Address:	
City, State, Zip:	
Phone Number:	
-	
Personal Reference Name:	
Address:	
City, State, Zip:	
Phone Number:	

H. REQUIRED PHOTOS: (all fields must be completed)

The photographs listed below are required for a home to be evaluated by the adoption coordinator. If you do not submit all of the below photos or if the adoption coordinator has any questions or concerns, we will schedule an in person pre-adoption home visit.

Barn (outside and inside)	Stalls (outside and inside)
Property entrance	Water source
Fencing (at least three photos – fencing	type and fence posts must be visible)
Feed and feed storage	Shelter (manmade or natural)

Cattle guards (if there are any on the property)

Other equines on the property

I the undersigned understand I am applying to adopt equines from Storybook Rescues, Inc. ("SBR") I also understand that I must complete the application process and my home (or boarding facility) must be approved before being allowed to adopt any equine from SBR. I understand that I may not be able to adopt the equine I want for various reasons.

I agree and understand that SBR reserves the right to request a background check, including criminal records to verify personal information.

By signing this adoption home application, I agree that I have read and understand the adoption policies of SBR. I agree that I will submit a completed adoption application and must have approval from an officer of SBR before I am allowed to adopt an equine.

If adopting from SBR I agree that I will never sell, give away, lease out, send to slaughter or otherwise remove any equine I have adopted. If at any time I am unable to take care of an adopted equine, I will return the equine to SBR immediately. If the adopted equine dies, I will contact SBR to notify them of the event and reasons. I also understand that I may never use any adopted equine for breeding purposes for any reason.

By signing this application, I agree that I have read and understand the adoption/foster policies of SBR. I agree that I will submit a completed adoption/foster application and must have approval from an officer of SBR before I am allowed to adopt/foster an equine.

In addition, I, the undersigned, have read and understand the following warning:

WARNING

UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

Applicant

Applicant (if Joint request with spouse)

Approving Official

Please return application and all photos to storybookrescues@outlook.com

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Date

Date

Date